DOCUMENT RESUME

ED 366 449 PS 022 071

TITLE	Prenatal Exposure to Substances of Abuse: An Evaluation of the Drug Free Schools and Communities Act Emergency Grants Program.
INSTITUTION	New York City Board of Education, Brooklyn, NY. Office of Research, Evaluation, and Assessment.
PUB DATE	Aug 93
NOTE	33p.
PUB TYPE	Reports - Evaluative/Feasibility (142)
EDRS PRICE	MF01/PC02 Plus Postage.
DESCRIPTORS	*At Risk Persons; Drug Abuse; *Drug Education; Elementary School Teachers; Identification; *Inservice Teacher Education; *Prenatal Influences; Preschool Teachers; Primary Education; Program Effectiveness; Program Evaluation; *Substance Abuse; Teacher Attitudes
IDENTIFIERS	*Fetal Drug Exposure; New York City Board of Education

ABSTRACT

A program was developed and implemented to train early childhood educators in two New York City school districts in how to identify and refer students who have been prenatally exposed to drugs or alcohol. Two substance abuse prevention and intervention specialists implemented the program, training 88 teachers in 4 schools. At the end of the project a curriculum guide was developed to serve as a handbook for replicating the program elsewhere. Evaluation data indicated that teachers increased their knowledge of prenatal drug and alcohol exposure. Teachers also felt that presentations at instructional workshops could be made more clear. A number of recommendations are made in the areas of communication and collaboration, procedure and implementation, and content. (MDM)

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OREA Report

PRENATAL EXPOSURE TO SUBSTANCES OF ABUSE: AN EVALUATION OF THE DRUG FREE SCHOOLS AND COMMUNITIES ACT EMERGENCY GRANTS PROGRAM

AUGUST 1993

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EXECUTIVE SUMMARY

INTRODUCTION

The Emergency Grant program and curriculum were developed in response to the ever-growing problem of children's prenatal exposure to drugs and alcohol. The aim of this program was to train early childhood education teachers in how to identify and refer students who have been prenatally exposed to drugs/alcohol. The program also explored the applicability of traditional service delivery models for at-risk children, and children of alcoholics/substance abusers, to prenatally exposed youngsters.

IMPLEMENTATION

This project was implemented in Community School Districts 1 and 24, both of which contain ethnically diverse communities and a prevalence of drug use. In C.S.D. 1, P.S. 15 and P.S. 188 participated, and in C.S.D. 24, P.S. 89 and P.S. 102 were targeted. Two Substance Abuse Prevention and Intervention Specialists (SAPIS) implemented the program, one in each district. All kindergarten through third grade teachers (88 in all) in the four schools were given training workshops. Three classroom lessons were also provided for the students of teachers who received training. These lessons focused on feelings, self-esteem, decision-making, and healthy habits. Students who were identified as at-risk were counseled by the project SAPIS (a total of 86 students). In addition, project SAPIS did turnkey training of the SAPIS in their respective district; 37 SAPIS were trained. At the end of the project, a curriculum guide was developed to assess the applicability of the program to both COAs/COSAs and the prenatally exposed children, and to serve as a handbook for replicating the program elsewhere.

FINDINGS

Evaluation data indicate that teacher workshops were well received, but presentations needed to be clearer, particularly in terms of articulating the signs and symptoms of prenatal exposure. Similar findings are reported for the SAPIS workshop as well. Pretest/posttest data show that teachers did increase their knowledge as a result of the training. Classroom lessons were generally well-organized and well-received, but needed to be age-appropriate. All students targeted for services received counseling by project SAPIS. These students responded enthusiastically to both the SAPIS and the counseling sessions.

RECOMMENDATIONS

Recommendations are grouped into three categories: (1) communication and collaboration; (2) procedure and implementation; and (3) content issues. The most critical

recommendations include allowing sufficient time for training workshops, taking steps to increase the communication among participants of the program to help smooth its implementation, and clarifying the contents of the curriculum guide.

ACKNOWLEDGEMENTS

This report has been prepared by the Office of Research, Evaluation, and Assessment (O.R.E.A.) of the Division of Strategic Planning/Research Assessment. Those who generated this evaluation report include Mabel Payne, who managed the project, and Lynne Manzo who collected and analyzed the data, and wrote the report. A note of thanks to Nina Gottlieb and Carol Meyer for their editorial assistance.

This program was administered by the Office of Comprehensive Health and Substance Abuse Prevention. Thanks also go to the Directors of the Substance Abuse Prevention and Intervention Programs in Community School Districts 1 and 24, the project director, Sharon Dorr, and to the Substance Abuse Prevention and Intervention Specialists who implemented this project, Mary McKenzie and Rosalind Langer. Their hard work and cooperation helped the evaluation run smoothly.

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TABLE OF CONTENTS

EXECUTIVE SUMMARY 1

ACKNOWLEDGEMENTS iii

I. INTRODUCTION 1
Background 1
Target Populations 3
Project Objectives 4
Evaluation Objectives. 7
Evaluation Methodology 7
Scope of This Report 9

II. FINDINGS 10
Program Planning 10
Staff Development. 11
Classroom Lessons. 17
Student Data 18
Parent Participation 19
Curriculum Guide 20

III. DISCUSSION AND RECOMMENDATIONS 22
Program Planning 22
Staff Development. 22
Classroom Lessons. 24
Parent Participation 25
Recommendations. 25

I. INTRODUCTION

BACKGROUND

The Emergency Grants program* was a one-year project created mainly to train early childhood teachers (kindergarten through grade 3) in how to identify students who have been prenatally exposed to drugs and/or alcohol and refer them to needed services. These students present new challenges to teachers, since they exhibit both behavioral and physical difficulties. Today's New York City Public School teachers must learn not only how to handle the difficulties such children may present, but also how to adequately serve them and contribute to their learning and growth.

Children who have been prenatally exposed to drugs and/or alcohol begin life facing physical and neurological difficulties. They often have low birth weight, and exhibit Neonatal Abstinence Syndrome, a condition in which infants experience withdrawal from the addictive substance to which they were exposed in the womb. This syndrome is characterized by excessive irritability and crying, as well as eating and sleeping difficulties. Today, the widespread use of addictive drugs, such as "crack", increases the numbers of children being born addicted to drugs, who then undergo physical withdrawal at birth.

Children who have been prenatally exposed specifically to large amounts of alcohol exhibit Fetal Alcohol Syndrome (FAS),

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*The full title of this project is "Drug-Free Schools and Communities Act, Emergency Grants Program P.L. 101-226 Section 5136", but will be referred to in the text as the Emergency Grants Program.

which is marked by various congenital birth defects. These babies often experience growth retardation and some type of facial dysmorphology, such as microcephaly (an exceptionally small head circumference), small eyes/eye openings, flat philtrum, and thin upper lip. They are also considerably irritable, hyperactive, and get easily overstimulated. Fetal Alcohol Syndrome is said to be diagnosed in at least two of every 1,000 live births.

Children who are born with some, but not all, of these symptoms have Fetal Alcohol Effects (FAE). This condition is said to account for even greater numbers of children. Behaviorally, these children are tremulous, irritable, hyperactive, and may exhibit only a minimal ability to improve their learning capacity. How long this deficit may last is still unclear.

In addition to the physical symptoms outlined above, research indicates that children prenatally exposed to drugs and/or alcohol show major deficiencies in cognitive development, particularly concept formation and self-organization. This is compounded by the fact that children of substance abusers often experience a painful and unstable home life that may hinder proper psychological development.

It has been hypothesized that the symptoms of prenatal exposure in school-aged children may be similar to the symptoms of children of substance abusers (COSA) and children of alcoholics (COA) who may not have been prenatally exposed to

these substances. Hence, the Emergency Grants program was also designed to explore any possible differences in these populations, and to determine whether present counseling services must also be tailored to accommodate these differences.

While research on the damage caused by prenatal exposure to drugs and alcohol is increasing, results are sometimes inconclusive, and much still needs to be learned. In particular, there is little longitudinal research which examines the behavioral and physical difficulties prenatally exposed children experience as they grow older and enter the school system. These difficulties may interfere with a child's ability to function well in the classroom setting. This project was implemented to address the shortcomings in the literature, and fill the gap in current knowledge of prenatal exposure and its effects in school-aged children.

TARGET POPULATIONS

The Emergency Grants program was implemented in two community school districts in the New York City Public School system in 1991-92: C.S.D. 1, which serves the Lower East Side of Manhattan, and C.S.D. 24, which serves Middle Village, Elmhurst, and a portion of Jackson Heights, Queens. Within each district, two elementary schools participated. In C.S.D. 1, P.S. 15 and P.S. 188 were targeted. In C.S.D. 24, P.S. 89 and P.S. 102 were involved. Under the direction of a project director from the Division of Student Support Services, a Substance Abuse Prevention and Intervention Specialist (SAPIS) was assigned to

implement this project in each of the two districts. (These two individuals are referred to later in the report as "project SAPIS.")

Both C.S.D. 1 and C.S.D. 24 contain diverse, and predominantly minority, communities. According to the Annual Pupil Ethnic Census data collected by the Division of Computer Information Services (CIS), the ethnic composition of the student population in C.S.D. 1 in October 1991 was 71.5 percent Hispanic, 15.4 percent black, 7.7 percent Asian, and 4.9 percent white. C.S.D. 1 is a largely impoverished district. According to CIS, the School Poverty Percent projected for the 1992-93 school year from data available in October 1991 was 92.4 percent in P.S. 15 and 86.2 percent in P.S. 188. This district, also known as "Alphabet City," is notorious for its drug problems. In addition, many of New York City's homeless population reside in the various temporary housing shelters located in the area.

According to CIS, the ethnic breakdown of the student population in C.S.D. 24 in October 1991 was 49.3 percent Hispanic, 26.8 percent white, 17.9 percent Asian, and 5.8 percent black. The School Poverty Percent was 66.6 percent for P.S. 89 and 52.4 percent for P.S. 102. Arrest records from police precincts in this district indicate a prevalence of alcohol and drug use in this area. One portion of the district is a known crack area.

PROJECT OBJECTIVES

Overall, the goals of the Emergency Grants program were to 1) assess the methods of providing substance abuse prevention and intervention services to prenatally exposed children; and 2) determine whether prenatally exposed children fit into existing models used to provide services to children of alcoholics (COAs) and children of substance abusers (COSAs). The following is a more detailed description of the program objectives.

Program Planning

The project director and SAPIS who implemented this project worked together during the fall 1991 term to 1) identify community resources to whom at-risk students could be referred; 2) develop a staff development program designed to sensitize school staff to issues of substance abuse in general and of prenatal exposure to drugs/alcohol in particular; and 3) design a screening instrument to help early childhood education teachers identify at-risk and prenatally exposed children.

Staff Development

Within each of the four target schools, two after-school training workshops were to be provided for all kindergarten, first, second, and third grade teachers. The goal was to instruct teachers in how to identify and refer children who may have been prenatally exposed to substances of abuse or who may be COA/COSA, and to increase their knowledge of the methods used to refer students to the Substance Abuse Prevention program in their schools. In addition, SAPIS throughout C.S.D. 1 and 24 were

given workshops on prenatal exposure, led by the project SAPIS from their respective district, to increase their knowledge of prenatal exposure.

Classroom Lessons

Upon completion of teacher training, project SAPIS were to present three lessons to the classes of participating teachers, i.e., students in kindergarten through the third grade in the four target schools. The goal of these lessons was to provide project SAPIS with the opportunity to screen students first-hand, and to further staff development by demonstrating to teachers how students' behavior in the classroom can signal their possible at-risk status.

Counseling

Students who were identified as in need of services by either their teachers or the project SAPIS were to receive counseling by the project SAPIS. This could be either individual or group counseling. At the completion of the project, the students who had received counseling were to be incorporated into the ongoing substance abuse prevention and intervention programs in their schools, or referred to any appropriate outside agencies.

Parent Participation

Based on the receptiveness of the parent population, workshops were to be provided to parents of students in the target schools. The goal of these sessions was to inform parents of the various substance abuse prevention and intervention resources available in the schools and communities.

Curriculum Guide

At the end of the project, members of the Office of Comprehensive Health and Substance Abuse Prevention were to develop a curriculum guide, which would offer a model for how to provide intervention services to prenatally exposed students. It was to include appropriate activities and classroom lessons as well as a list of strategies used by teachers in working with at-risk children in the classroom.

EVALUATION OBJECTIVES

Based on the program objectives, the Office of Research, Evaluation, and Assessment developed a number of evaluation objectives. They were to:

- determine the usefulness, strengths, and weaknesses of the teacher training workshops;
- determine any increase in knowledge among staff as a result of the project;
- determine the effectiveness of classroom lessons provided by project SAPIS;
- assess the classroom progress of students who have received counseling through this program;
- determine the extent and effectiveness of any parent workshops;
- determine the effectiveness of the screening instrument used by teachers for identification and referral of at-risk students; and
- determine the effectiveness of the curriculum guide.

EVALUATION METHODOLOGY

During the program planning phase of the project, an OREA evaluator provided technical assistance to project staff in developing the screening instrument to be used by participating teachers in identifying at-risk children. The evaluator also developed all other evaluation instruments, i.e., observation guides to be used by the evaluator, teacher and SAPIS feedback

forms, pretests/posttests administered to teachers receiving staff development, and interview instruments.

At the end of all teacher workshops, project SAPIS distributed feedback forms to teachers who attended the training in order to determine the usefulness of the workshop. The evaluator also observed a sample of teacher training workshops in each of the four schools, and interviewed a sample of teachers who attended them.

In addition, project SAPIS distributed pretests/posttests to teachers receiving training in order to determine any increase in their knowledge as a result of the project. While all pretests were distributed at the beginning of teacher workshops, postests were distributed at different times during the project. That is, some posttests were given out immediately after the training workshops, and others months later, at the end of the project year.

The evaluator also observed a sample of classroom lessons presented by project SAPIS in all four of the target schools. These lessons were provided to the students of teachers who received training through this project. Each classroom received three lessons. The sample observed included kindergarten through third grade classes, and all three of the lessons provided to each class.

Furthermore, the evaluator reviewed SAPIS program logs and interviewed a sample of project students to evaluate the student counseling component of the project.

Evaluation forms were distributed at the end of each parent workshop to determine the extent of parent involvement and the concerns parents have regarding substance abuse and its effects

on their children.

After the project was implemented in the target schools, the evaluator reviewed the curriculum guide which was developed as a result of the project, and interviewed project SAPIS to get their perspective of the strengths and weaknesses of the program.

SCOPE OF THIS REPORT

The introduction in the preceding pages provides the background information regarding prenatal exposure to drugs and alcohol. It also describes the target populations of this project, as well as project and evaluation objectives.

The findings section below describes the results of the evaluation. In this section, the effectiveness of program planning, staff development, classroom lessons, student services, and parent participation are addressed. The curriculum guide developed as part of this project is also critiqued here.

The final section of this report (page 20) discusses the conclusions of this evaluation, and outlines recommendations which may be useful in considering similar projects in the future.

PROGRAM PLANNING

To assess the program planning component of the Emergency Grants project, the OREA evaluator reviewed all instruments that were developed for implementation in this project, and the extent to which community resources were identified to participate. As part of the program planning, the Office of Comprehensive Health and Substance Abuse Prevention also developed a curriculum guide, which is reviewed on page 20.

Instrument Development

A review of the screening and evaluation instruments developed for this project showed them to be adequate for their purposes. Teachers reported that the screening instrument and teacher checklist were both easy to use and were effective tools for school staff use. However, a review of the pretest/posttest given to teachers revealed some limitations in this instrument as a test of knowledge gained. Since many of the questions on this test were open-ended, responses were difficult to code, and scores were difficult to determine. For example, a question asking for a list of the signs and symptoms of prenatal exposure has numerous correct answers, so that responses must not only be scored in terms of their correctness, but in terms of how many of the various correct symptoms were listed. In addition, some pretest/posttest questions did not address the purpose of testing - i.e., to determine an increase in knowledge - and were consequently dropped from the scoring schema.

Community Resources

In addition, the evaluator reviewed all project SAPIS correspondence to determine the extent to which community

resources were identified and contacted to participate in this project. Based on SAPIS interviews and their log books, it is clear that community resources were identified and contacted about this project. Some of the organizations involved included the Henry Street Settlement in C.S.D. 1, and the outreach project in C.S.D. 24. However, while these community-based organizations sent letters to project SAPIS in support of the project, it is unclear whether they participated in the project.

STAFF DEVELOPMENT

Teacher Workshop Evaluations

The two project SAPIS provided workshops to teachers in all four of the target schools. A total of 88 school staff (86 teachers and two non-instructional staff) received training. Feedback forms revealed that teachers found the workshops generally useful. The vast majority rated the workshop as either "excellent" (30 percent) or "good" (64 percent), overall. They also rated the clarity of the workshop objectives as "excellent" (34 percent) or "good" (61 percent). Similar ratings were given to the effectiveness of the presenter; 45 percent rated her effectiveness as "excellent" and another 51 percent rated it as "good".

However, open-ended data revealed some problems with the workshop. While many teachers (53 percent) commented that the discussion of the topic was important and helped them to learn about different causes of classroom "misbehavior," they also stated that there was not enough time to cover the topic adequately (47 percent), and that presentations needed to be clearer regarding the specific signs and symptoms of prenatal exposure. Those participants who commented about the discussion

of signs and symptoms of prenatal exposure gave mixed responses about this aspect of the workshop. Twelve percent stated that it was the most useful aspect, while 11 percent reported that it was the weakest feature.

The majority of teachers (67 percent) reported feeling more knowledgeable as a result of this training. Yet, teachers often commented that they wanted to learn more about prenatally exposed children and about how to help them. Forty-one percent of the teachers in one school reported that they needed more advance notice in order to participate in such training because coverage for classrooms was sometimes late or nonexistent.

Teacher Training Observations

Observations of teacher training workshops by the OREA evaluator provided further evidence that not all teachers' questions were adequately addressed, and that more clarity was needed in addressing the distinctions between prenatal exposure and other behavioral problems. Teachers repeatedly asked about the distinction between signs of prenatal exposure and symptoms of other problems. The facial expressions and comments some teachers made among themselves at the conclusion of the workshop also indicated that some participants left the workshop still confused about the signs and symptoms of prenatal exposure, and how to work with a prenatally exposed child.

Workshops between the two districts varied considerably. For example, in one district, teachers were shown a film, while in the other district they were not. One reason for this discrepancy is that the project was run by different SAPIS in each district, who adopted their own unique strategies for staff development. Teacher training workshops were also provided in

the target schools at different times during the school day due to scheduling difficulties which repeatedly arose during the course of the project. Evaluators' observations revealed inconsistencies in training workshops within each district as well. Training sessions varied in length, depending on how each school scheduled the training.

Teacher interviews

Teacher interview data confirmed findings from the workshop evaluation forms. A sample of 18 teachers from the four target schools were interviewed as part of the evaluation.

Positive opinions. All but three teachers reported that the workshops were useful, mainly because they provided new information regarding prenatal exposure to drugs/alcohol, through both discussion and handouts. Some of these teachers remarked generally that "it is a timely topic," "important to address," while others spoke more specifically about the utility of learning the signs and symptoms of prenatal exposure and related terminology. Teachers also stated that their increased awareness caused them to re-evaluate their students based on their new knowledge.

Teachers described many other things they learned as a result of the training. Some teachers pointed out that they learned about the nature of the addiction and the appropriate terminology. Others indicated that their increased awareness of the phenomenon would enable them to make referrals. As one teacher remarked, "I learned not to generalize misbehavior and learning problems into one category of special education."

Given this positive review, it is not surprising that many teachers interviewed (56 percent) wanted more training,

specifically on the topic of prenatal exposure. One teacher suggested, "Do something every year as a refresher." Another teacher who wanted more follow-up stated, "We receive so many workshops that are totally irrelevant, but this was not one. It was important."

Negative opinions. However, even those teachers who found the training useful had some criticisms. Most teachers (72 percent) felt they needed more, and clearer, information. Some teachers (39 percent) requested more examples of the physical and behavioral symptoms which illustrate the phenomenon, and more concrete, practical information on what to actually do with students in the classroom. As one teacher stated, "We need something more practical. I need to know more of what to look for." Several teachers (17 percent) stated that the workshops were not applicable to their students.

Integration of knowledge into daily activities. When asked whether they had applied any new knowledge into their daily activities as teachers, half (9) of those interviewed said that they did not. Six of these nine teachers reported that they already conducted class lessons with their students on such issues as family problems, feelings, and the dangers of smoking and drinking. The remaining three teachers reported that they did not feel it was part of their role as a teacher to deal with these issues in the classroom: "It does not readily fit in with my regular lessons." Only one person indicated that she/he did not apply anything learned because she/he was not taught how to do so.

Those teachers who stated that they applied what they had learned in the training to their daily activities as teachers

reported being more sensitive in their interactions with students. Most of the teachers interviewed (12 of 18) had students who were receiving counseling as a result of this project. However, eight of these 12 teachers indicated that they had not seen any changes in the classroom behavior of the counseled students.

Pretest/Posttest Data

An increase in teachers' knowledge of prenatal exposure was demonstrated, to some degree, in pretest/posttest data. Inconsistent distribution of the test limited the accuracy of the results; some teachers did not complete both the pretest and the posttest. However, teachers who had matched tests did show improvement in their posttest scores. Nine of the 11 teachers who took both tests could better describe differences among the use, misuse, and abuse of drugs and alcohol as a result of the training. Posttest responses also indicated that teachers had gained an understanding of addiction and toxicity, and could describe the effects of cocaine on the body more fully and accurately. In addition, 45 percent of the teachers with matched tests gained a better sense of what action to take to better service a prenatally exposed student, either through referrals or classroom tactics.

Moreover, project SAPIS' and teachers' use of the screening instrument which was developed in this project also demonstrated that teachers had increased their knowledge of the methods of referral. This was evidenced in both teacher and project SAPIS interview data.

Workshops for other SAPIS

Project SAPIS gave one workshop in their respective district

for the other SAPIS who worked in that district. A total of 37 SAPIS received training; 29 in C.S.D. 24 and eight in C.S.D. 1.

Evaluation form responses. At the end of these two workshops, evaluation forms were distributed to participants. The response rate was 78 percent. Eighty-six percent of the respondents rated the workshop overall as either "excellent" or "good", and 83 percent said the objectives of the workshop were clear and were met. The majority of SAPIS (93 percent) also rated the presenter as effective. Consequently, most respondents (76 percent) reported feeling more knowledgeable as a result of participating in the workshop, although 38 percent reported already having had prior training on prenatal exposure.

While the objective ratings of the workshop were positive overall, responses to the open-ended questions revealed some problems with the presentations. Like the teachers who received training, 38 percent of the SAPIS wanted more specific information on how to implement this new knowledge into their activities. They asked for more concrete, hands-on instruction on techniques and strategies to use while working with prenatally exposed or at-risk children. In addition, a number of SAPIS (28 percent) asked for more clarity regarding the signs and symptoms of prenatal exposure to substances of abuse.

Observations by OREA evaluator. Observations of SAPIS workshops indicated some confusion among participants regarding the signs and symptoms of prenatal exposure, and what to do when encountering a prenatally exposed child. This was evident by the frequency of questions in these two areas, with some participants expressing dissatisfaction with the lack of clarity in the presentations.

CLASSROOM LESSONS

The OREA evaluator observed a total of 14 classroom lessons provided by project SAPIS, and attempted to observe the same classrooms through all three lessons when scheduling allowed. In C.S.D. 24, she observed all three lessons for one kindergarten class in P.S. 102, and two third-grade lessons and one kindergarten lesson in P.S. 89. In C.S.D. 1, she observed three second-grade class lessons in P.S. 188, and three third-grade class lessons in P.S. 15. One kindergarten and one first-grade class were also observed in this district.

Classroom lessons in both districts addressed three areas: 1) feelings; 2) decision-making; and 3) safety and health. While the topics of the class lessons were the same in all four target schools, the two project SAPIS providing the lessons used different methods to address these topics, making it difficult for the evaluator to make direct comparisons between the lessons from the two districts. For example, the two SAPIS used different exercises and handouts to present the lesson on healthy habits and safety.

Observation data indicated that the classroom lessons given to kindergarten through third grade students were effective and enthusiastically received by students. One of the strongest components of the lessons was the discussion on feelings and self-esteem. This component was well thought-out, and students responded most enthusiastically to it. However, not all lessons were age-appropriate, because they did not vary in content or complexity from grade to grade.

STUDENT DATA

SAPIS Logs

All of the students targeted for services in the four target schools were counseled by the project SAPIS either individually or in groups, as evidenced in SAPIS logs. Some students were referred by teachers as a result of their participation in the project, while others were identified by the project SAPIS themselves through the classroom lessons. According to project SAPIS, a total of 86 students received counseling services: 41 students in C.S.D. 1 and 45 in C.S.D. 24.

Student Interviews

The OREA evaluator interviewed a sample of 17 students in kindergarten through third grade who received counseling services to determine the effectiveness of the counseling they had received. All students reported enjoying talking to the SAPIS, and found it helpful. Most of the students' discussions with SAPIS focused on feelings and the dangers of drugs. Students also reported talking about family problems, healthy habits, getting along with others, and their feelings regarding school during counseling sessions.

The enthusiastic responses of students interviewed indicated strong positive feelings for the SAPIS, and the value that the counseling had for them. As one student remarked, "She is like my big sister... she listens to me and I can talk to her."

PARENT PARTICIPATION

One parent workshop was run in C.S.D. 1 for eleven parents, most of whom were parents of prenatally exposed children.* All parent participants completed an evaluation form at the end of the workshop. Their responses indicated that they found the

*Parent workshops were not provided in C.S.D. 24, since no parents expressed interest in participating.

workshop helpful as a forum for discussing how to be more involved in the children's schools and in their lives in genera.. They also indicated that the workshop focused more on the nature of prenatal exposure as a source of difficulty in school, than on resources that are available to families in the community.

CURRICULUM GUIDE

The overall objective of the Emergency Grants project as a whole was to compare models of current programs that provide substance abuse prevention and intervention services and to determine whether prenatally exposed students can fit into these existing models.* However, no clear statement was made in the guide about how applicable current program models are to the prenatally exposed population, nor what similarities and differences exist among FAS/FAE, COA/COSA, and other prenatally exposed children.

The curriculum guide included the checklist and screening instrument used by teachers as well as a teacher-generated list of strategies which teachers had found successful in working with at-risk students in the classrooms. The curriculum guide also provided agendas for both teacher and parent workshops. Teacher workshops were designed to be presented in two parts, and parent workshops in eight. However, no rationale was provided for the topics and their progression, how they should be presented, nor how long they should be. In terms of parent workshops, no statement was made as to who, exactly, the target parents should be, or how they should be reached. There was no indication of any time frame for either the workshop as a whole, or for each

*Due to time constraints, the data presented here are based on a draft of the curriculum guide developed by the Office of Comprehensive Health and Substance Abuse Prevention.

topic within the workshop. Furthermore, there was no indication of how, exactly, one should address the topics listed (i.e., what kind of statements to make, or what message to get across).

The curriculum guide included a description of well-organized classroom presentations. Once again, however, there was no indication of how much time the presenter should spend on each topic or activity. The list of activities presented as part of one lesson was quite long, and included a discussion of feelings, several drawing activities, reading stories, making posters, and writing compositions. It was not clear whether these activities were to be accomplished during one class period (which does not seem possible), or a day, or whether it was a list of activities from which the presenters could choose. Also, a rationale for the topics, activities, and goals of the lessons was not included.

III. DISCUSSION AND RECOMMENDATIONS

PROGRAM PLANNING

This program focused on early childhood education teachers on the basis of the latest problem of crack-addicted children. However, in the implementation of the program, it was unclear which students were the focus: children exposed to crack, children with FAS, or COA/COSA. If this program was intended to provide services to children of substance abusers, or to those who have been prenatally exposed to substances other than crack, then older students may also benefit, and additional programs could be expanded to include them.

More attention needed to be paid to the similarities and differences between children who were prenatally exposed, children of substance abusers, and children with other difficulties. While the curriculum guide purports to explore these similarities and differences, they were not adequately articulated in the program, as implemented and evaluated.

STAFF DEVELOPMENT

The majority of teachers reported feeling more knowledgeable as a result of the training. In general, teacher interview data indicated that the increase in teacher's knowledge led to a greater awareness of, and sensitivity to, the issues behind their students' behavior.

The fact that, for the most part, teachers wanted more training speaks to the perceived importance of this topic by the majority of teachers interviewed. Overall, most teachers seemed very interested in informing themselves about prenatal exposure, and in trying to help their students, but they were not comfortable with the lack of concrete information available on

this topic. They wanted more hands-on, concrete suggestions for what to do in the classroom. Apparently, a second session is critically needed, when one considers teachers' feedback wherein the majority said the workshops needed more time. The second session of the teacher workshops should be required, rather than optional to help ensure good attendance. During an observation of the first session of a teacher workshop, SAPIS described session two as optional, and consequently, no one attended.

Observations of teacher workshops indicate that the topic of prenatal exposure was not adequately addressed. This can be attributed, in part, to the nature of the topic; there is still much to learn about the phenomenon of prenatal exposure to substances, there is little consensus on what is known, and there is little longitudinal research which follows youngsters to school age.*

In addition, the distinction among prenatal exposure and other behavioral problems was one of the most frequently discussed, yet unclear, issues in the training workshops. The lack of distinction between difficulties rooted in prenatal exposure and difficulties caused by other problems is reflected in the existing literature, yet project SAPIS could have better explained this in the workshops of this project.

Interview data also reveal disagreement among teachers as to whether addressing prenatal exposure is part of the teachers' role, although most teachers think it is an important issue. Some teachers stated that they already conduct class lessons on

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*The oldest prenatally exposed children being systematically studied at this time are just turning five. This figure is based on the July 1990 (No. 9) issue of the Research Bulletin, published by the Hispanic Policy Development Project, in which these children are three years of age.

family problems and the dangers of smoking and drinking, while others responded that it was not part of their role. This then raises the question as to whose responsibility it should be to see that students receive information and other services they may need, and whether students can function well academically if needs and problems are not addressed. Currently, SAPIS present classroom lessons and other services.

SAPIS responded to their workshop in a manner similar to that of teachers. While the objective ratings of the workshop were positive overall, the more open-ended questions revealed some drawbacks of the workshop. Like teachers, the SAPIS who received the training felt that more information was needed on how to integrate new knowledge on prenatal exposure into their school activities. They also needed more concrete, hands-on instruction on techniques and strategies to use while working with prenatally exposed and at-risk children.

CLASSROOM LESSONS

One of the most critical components of the three class lessons provided was the discussion of feelings and self-esteem. These notions help establish a firm base for children to grow and adequately confront difficulties in their lives, including substance abuse.

Not all class lessons were age-appropriate. Some of the concepts presented within the class lessons needed to be broken down in a comprehensible manner for kindergartners, and other concepts may have been too obvious for third graders. For example, the concept of addiction and taking responsibility for oneself may be too sophisticated for a kindergartner, while the issue of whether dish detergent is safe to put in one's mouth may

be a bit obvious for third graders.

PARENT PARTICIPATION

The fact that parent workshops were not provided in C.S.D. 24 was due to the lack of interest among parents in that district. This was not surprising, since parents of prenatally exposed children are often still substance abusers and may not wish to face their responsibility for their children's problems. Lack of interest may also reflect a sense of alienation from the education system. Focusing on providing referrals to community organizations which would provide appropriate assistance may be more useful.

RECOMMENDATIONS

There are a number of critical recommendations that can be made if this project, or a similar one, were to be implemented again in the New York City Public Schools. These recommendations are grouped into the following themes: (1) communication and collaboration; (2) procedure and implementation; and (3) content issues.

Communication and Collaboration

- Project SAPIS should receive additional training in workshop facilitation to enhance the clarity of their presentations, especially when conveying technical information.
- Project SAPIS who have had no prior experience in program implementation should receive on-going, direct guidance and feedback from the Office of Comprehensive Health and Substance Abuse Prevention (O.C.H.S.A.P.) project coordinator.
- The O.C.H.S.A.P. should encourage communication and collaboration between the project SAPIS to enhance consistency in the implementation of the project in several districts simultaneously.
- It is critical for the project coordinator to be more actively involved in scheduling and follow-up to ensure the execution of all project activities and the full

cooperation of school administrators.

- There must be greater collaboration between the project implementers and evaluators in terms of instrument development, particularly for pretest/posttests, to ensure that testing instruments are developed with greater validity.

Procedure and Implementation

- Adequate time must be allowed for school staff training, not only to present information, but to fully discuss the issues raised. This includes time for follow-up activities.

- Teachers who are involved in the project should be formally notified, via the principal's office, about the project prior to the workshop to help ensure good attendance, cooperation, and awareness of the goals of the project among school staff.

- In one-year projects such as this, it is essential that students are incorporated into other ongoing programs for additional services.

- Pre-tests and posttests should be distributed to all program participants at the same point in the program.

Content Issues

- The curriculum guide should provide clear information on how to implement workshops. Descriptions of how to address the topics, and any specific exercises to be carried out should be included.

- Project developers should select topics for class presentations that are more specifically related to issues of prenatal exposure and children of alcoholics/children of substance abusers.

- Project developers should think carefully about the implications of the classroom lessons and how to present them. For example, if a student is being taught about the dangers of smoking, consider the implications of telling a youngster whose parents smoke that people who smoke will die. (This issue was raised in one class lesson on healthy habits.)

- The contents and mode of presentation of classroom lessons must be age-appropriate and should be reviewed to ensure their age-appropriateness.

- Rethink the parent participation aspect of such projects. Since this program looks at the problems prenatally exposed children may face, how realistic is it for the parents of such students (who are often still drug users) to attend workshops on parenting? This component could

be revised to provide referral to appropriate community agencies.

Overall, the problem of children being prenatally exposed to drugs and alcohol is a critical one that the New York City Public Schools must address. Serious consideration should be given to how to help such "disadvantaged" children, and give them a chance to learn in an informed and supportive environment, so that they may improve their lives. Continued research and development of a project that deals with prenatal exposure is recommended. That is, before such a project can be implemented elsewhere, more research and thinking needs to be done, project implementers need more thorough training, and there must be more communication to ensure that the project can be implemented smoothly in target schools. However, the work done and knowledge gained from this project provides a good place from which to begin.